

Angelo Del Toro
 PUERTO RICAN | HISPANIC YOUTH



LEADERSHIP INSTITUTE

March 10-12, 2018

Delegation: _____

HOTEL ROOMING LIST

Single(S) Double(D) Triple(T)	Last Name, First Name, Middle Initial	Roommate Last Name, First Name, Middle Initial	If Triple Roommate Last Name, First Name, Middle Initial	Male or Female	Please Check One			
					Student	Chaperone	Staff	Bus Driver
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please submit this document by February 9, 2018

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